

PACE in Vermont



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Today's Agenda

- How PACE got started
- PACE Vermont, Inc.
- Planned waiver requests
- Assistance with stop loss
- Other considerations



Rural PACE

Vermont - Population

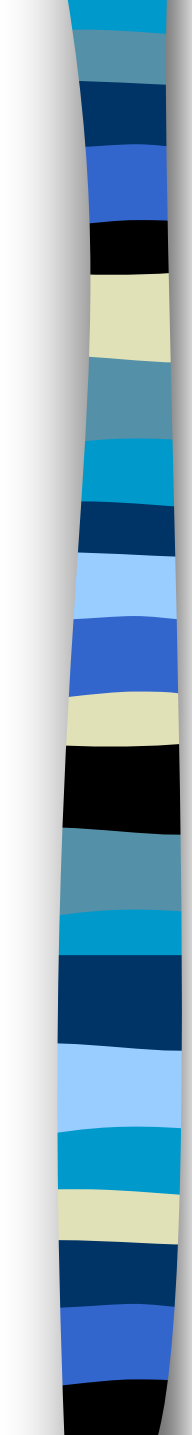
■ Vermont Population	609,000*
■ Vermont Medicare Pop.	86,588**
■ Vermont Medicaid Pop.	132,533**
■ Vermont Dual Eligible and RX Population	30,126**



Medicare/Medicaid Dual Eligible 65+

■ Rutland	2,714
■ Chittenden	2,749

Includes those in VHAP, VHAP Pharmacy, VSCRIPT, Pharmacy Discount Program and QMB/SLMB



Vermont Long-Term Care Context / Act 160

- Act 160 in 1996 called for the implementation of a statewide system of long-term care service coordination and case management.
- As a result of Act 160 the State of Vermont shifted the focus and funding of long term care service delivery from nursing homes only to a broader array of home and community based services



Long Term Care Coalitions

- 10 Long term care coalitions were created as a result of Act 160
- Coalition membership includes: consumers, home health agencies, area agencies on aging, adult day centers, nursing homes, housing providers, hospitals, and advocates.



State/Local Partnership

- Rural state
- No competition
- State role helping potential PACE sites



ASAP Grant

- Received ASAP grant from the National PACE Association - Spring 2002.
- Key to development – provided needed resources to create interest by providers.



Bid Process

- July 18, 2002 – Bidders conference Most of the Adult days, Home Health Agencies and hospitals attended from around the state. Also invited our department of Banking and Insurance.
- July, August and September 2002 – Interested coalition members and other community organization representatives met and developed one bid proposal per Long-Term Care coalition
- September 13, 2002 submitted bids



Development Process

- Hired Pace coordinator – Highly respected professional
- Two Coalitions selected to explore PACE
 - Chittenden and Southern Grand Isle County
 - Rutland County
- Incorporated Dec. 11, 2003 (PACE Vermont, Inc.)
 - One PACE Program with two centers
- Legislature appropriated \$100,000 to continue with planning, Executive Director for SFY 2005.
- FFP match so \$200,00 is available



PACE Vermont, inc

- May 26, 2004 elected transitional Board of Directors and adopted by-laws.
- Members include hospitals, home health agencies, adult day programs, area agency on aging, transportation providers, residential care homes, nursing homes, and community members.



Next Steps

- Work with TA to finalize financial proforma.
- PACE Vermont, Inc formed task force groups to draft application, plan for IT, Marketing, Space and Financing.
- Hundreds of hours of in-kind contribution of staff time to develop.



Waiver - Conflicts of Interest

- Regulation 460.68 Program integrity

No Member of the PACE organization's governing body or any immediate family member may have a direct or indirect interest in an contract that supplies any administrative or care related services or materials in the PACE organization



Waiver - Conflict of Interest

- Transition Board Members will have contracts with PACE Vermont
- Each member will sign a conflict of Interest form
- Each Member will be recused from participating in discussions and/or voting on contracts or other remunerations related to PACE



Waiver – Interdisciplinary Team

- Regulation 460.102
- Members of the multidisciplinary team must serve primarily serve PACE participants



Waiver – Interdisciplinary Team

- To start most staff will be contracted either from the hospital, home health or the adult day agency.
- Contract staff will work as members of the interdisciplinary team.
- When enrollment is small contract staff will need to serve others.
- The contract staff will be the individuals with orientation on PACE philosophy and required policies and procedures.



Waiver – Participant enrollment and Disenrollment

- Regulation 460.150
- Reside in the service area of the PACE organization



Waiver – Participant enrollment and disenrollment

- Due to the rural nature of the state individuals often travel into both Rutland and Chittenden Counties for services and employment from other areas.
- If transportation can be arranged PACE Vermont would like the options to enroll eligible individuals living outside the service area.



Waiver – Medicare Payment

- Regulation Subpart J section 460.180
- Monthly capitation amount is based on the aged Part A and Part B payment rates established for purposes of payment to Medicare+choice organizations.



Waiver – Medicare Payment

- Requesting a waiver of the new Medicare capitation payment implemented 1/1/2004.
- Maintain the existing frailty factor for 3 years
- New organization
- New risk factor based on prior year physician and hospital claims. Especially physician claims lack the necessary diagnosis coding to determine individual risk scores. Hospital claims should have the information, but that is only 30% of the claims.



Stop Loss

- Hospitals will step forward and assume the risk for hospitalization outside of the normal expectations.
- State is considering developing insurance for nursing home placement. Again the insurance will be when the placement falls outside the expected range.



Other Considerations – Volunteer Effort

- Commitment of providers, state and community members, elected officials
- In-kind contribution of existing providers staff to organize. This includes:
 - review draft provider application
 - develop marketing
 - design Information systems
 - recruit executive director
 - determine space



Questions?

- Further information about PACE Vermont:
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